SOP Title: Appropriate Treatment of Medical Students (Learners) in the Learning Environment

Rationale
The Brody School of Medicine is committed to providing an educational environment that is supportive and respectful of all members of the medical center community.

Standards of conduct in the learning environment which evoke mutual trust and understanding support the learning process. When all participants understand the standards of conduct between the teacher and learner and when all participants are held accountable to these standards, an environment is established that enhances both learning and professional development. Inappropriate behaviors may cause the learner to become cynical about the medical profession, interfere with the learning process, cause individuals to leave medical training, and promote an atmosphere in which abuse is accepted and perpetuated.

The Brody School of Medicine acknowledges that the diversity of learners, faculty, residents, and staff, combined with the intensity of the interactions between them may, from time to time, lead to alleged, perceived, or real incidents of inappropriate behavior or mistreatment of individuals. Whether intentional or not, these incidents result in a disruption of the learning environment that Brody strives to foster.

Scope
This standard operating procedure (SOP) applies to all incidents involving medical learners in the learning environment resulting in mistreatment, whether real or perceived.

Definitions
ECC: Executive Curriculum Committee. The ECC is charged with the overall oversight and control of the curriculum.
LEC: Learning Environment Committee. This committee will assist in monitoring de-identified reports of mistreatment and work with appropriate offices to assist in addressing concerns and developing educational materials related to learner mistreatment prevention.
LMS: Learning Management Software. Currently Elentra, this is the computer program or programs used to store and access curricular materials.
SADAA: Senior Associate Dean for Academic Affairs.
Mistreatment: Policies, speech, actions, or behaviors that treat a learner in a threatening, intimidating or otherwise inappropriate manner which adversely affect the learner’s learning environment.
BSOM: Brody School of Medicine
Behaviors Not Considered Mistreatment

The following behaviors are those not considered mistreatment:

- Setting high standards for conduct and achievement.
- Ensuring the safety and well-being of patients.
- Even handed application of conduct and educational standards.
- Constructive critical interactions between the teacher and learner.
- Asking questions in a public setting.

Behaviors Considered Inappropriate

Examples of inappropriate behaviors include, but are not limited to the following:

- Physical attacks, either threatened or actual*
- Insulting or unjustifiably harsh verbal communication
- Public belittling or humiliation
- Requiring performance of personal services (e.g. shopping or babysitting)
- Basing a grade or evaluation on reasons other than those related to course/clinical/professional performance.
- Sexual harassment*
- Intentional neglect or lack of communication related to course or clinical duties
- Taking credit for another individual’s work*
- Disregard for a student’s safety
- Retaliation against a learner who files a complaint

*East Carolina University and ECU Health Medical Center policies, as well as criminal or civil law, may be applicable.

Additional guidance in determining appropriate behaviors in the teacher/learner relationship are included in Appendix A at the end of this document.

Learners who believe they have been subjected to (1) sexual harassment by another learner or (2) any other form of sex discrimination against learners under Title IX, may report such misconduct or file a formal complaint with the East Carolina University Deputy Title IX Coordinator in The Dean of Students Office (DOS). Complaints regarding learner Title IX issues may be submitted by filling out the Student Complaint Form on the DOS Website; calling the ECU Cares Line at (252)737-5555; or filing a complaint in person at the DOS, located at 125 Umstead Hall, Greenville, NC; Office: (252)328-9297 Fax: (252)328-9174. For more information, please visit the Title IX and Student Services link located in Additional References, above.

Lastly, even if a learner does not wish to file a formal complaint, in order to comply with the Campus Security Act, the Anonymous Crime Reporting Form must be completed whenever any faculty or staff person with significant responsibility for learner activities becomes aware that a crime that has taken place. The awareness can come from a direct report from a learner, staff member, or a third party.
Responsibilities

Prevention
The Brody School of Medicine is committed to preventing inappropriate treatment of medical learners. The School of Medicine will address the issue of medical learner mistreatment through:

- Distribution of this SOP to medical learners, residents, faculty, administrators, nursing, and hospital staff to facilitate reporting and tracking of incidents.
- Development of educational materials to address topics of diversity, inclusion, mistreatment, and related issues.

Distribution
Information will be distributed to the concerned groups in the following manner, subject to annual review by the Senior Associate Dean for Academic Affairs (SADAA). There will be yearly attestation that learners, faculty, and staff are aware of this SOP.

- **For medical learners:** This SOP will be prominently displayed on the Office of Student Affairs webpage. Additionally, this SOP will be reviewed and explained at each year-specific orientation.
- **For faculty, residents, and fellows:** A copy of this SOP will be transmitted annually by the SADAA, along with school-specific data from the AAMC Graduate Questionnaire (GQ) regarding appropriate treatment of students. This information will be distributed to the Department Chairs and Graduate Medical Education Office with instructions to distribute the SOP to all staff who interact with learners in the course of their job. Additionally, the following actions will be taken:
  - Review of school data from the AAMC Graduation Questionnaire by the Executive Curriculum Committee and other governance bodies.
  - Inclusion as an agenda topic for chief resident, resident, and fellow orientations.
  - Inclusion as orientation material for new faculty.
  - Affiliated faculty will receive a copy of the SOP when receiving their Affiliate Faculty appointment and annually thereafter.
- **For nurses and other clinical staff:** A copy of this SOP will be transmitted annually by the SADAA, along with school-specific data from the AAMC Graduate Questionnaire (GQ) regarding appropriate treatment of students. This information will be presented to the President of ECU Health Medical Center, Chief Medical Officer of ECU Health Medical Center, chief of staff of ECU Health Medical Center, and Nurse Managers with instructions to distribute the SOP to all staff who interact with medical learners in the course of their job.
Education
The LEC will work with the Offices of Faculty Affairs and Leadership Development, the Office of Diversity and Inclusion, Office of Student Affairs, and clinical partners to develop educational materials and programs to foster a positive learning environment.

The LEC will have access to a dashboard, maintained by the Office of Data Analysis and Strategy (ODAS), of de-identified data that will allow for monitoring reports for trends and areas of concern.

Procedures
Reporting Procedure
To ensure all learners can report any concerns of mistreatment in a timely manner, a reporting form has been developed. This form, which allows reporting with or without personally identifiable information as well as an option to contact the ombudsperson directly, is available via a link on the LMS and Brody Office of Student Affairs website. In accordance with FERPA, all reports are considered part of the student record and protected under all applicable laws.

- Informal Reporting and Resolution: When an alleged mistreatment occurs, the parties directly involved should try, if possible, to resolve the matter informally.
  - The learner may contact the ombudsperson to initiate and support this process.
  - If the learner feels comfortable doing so, they may contact the course or clerkship leadership to initiate the informal resolution. No learner will be required to report to or through the alleged offender.
  - Confidentiality will be maintained except as required by applicable laws and/or University policies. Even in cases where an informal resolution is reached, the learner will still be encouraged to report the incident, anonymously or not, using the mistreatment reporting form.

- Formal Reporting and Resolution: The following steps will be taken during the formal reporting process to reach resolution:
  - The Mistreatment Reporting Form will allow for reporting with or without personally identifiable information about the reporter.
  - The SADAA or their designee will be responsible for monitoring reports at least weekly and will route them appropriately as needed for investigation and adjudication.
  - When possible, the individual reporting the incident will be contacted directly with information regarding the outcome or resolution of the incident. This information may be limited as Human Resources policies governing Faculty and Staff will apply.

- Resolution through Facilitation by the Ombudsperson: In some situations, reporting may be hindered by a variety of factors, including reluctance of the reporting individual to
address the alleged offender, or intransigence of the alleged offender. A position of Ombudsperson has been established to help resolve such conflicts. The role of the Ombudspersons is to collect information concerning the mistreatment incident from appropriate sources and mediate between the parties with the intent of reconciling the matter to the satisfaction of both parties. This process is designed to preserve the confidentiality of all parties involved to the extent possible. Policy and law prohibit retaliation for reporting and/or participating as a witness regarding a potential violation of law and/or University policy. The following duties apply to the Ombudsperson:

- Any person may contact the Ombudsperson to seek assistance in resolving a conflict for any reason.
- The Ombudsperson, who is chosen by the Dean, should not be an individual with medical learner supervisory or administrative responsibilities at the Brody School of Medicine.
- Incidents of mistreatment will be handled by the Ombudspersons according to their policy. The Ombudsperson will report all incidents, maintaining confidentiality, to the LEC at least annually.
- The Ombudsperson will provide a redacted report biannually directly to the Executive Dean of the Brody School of Medicine and the East Carolina University Vice Provost for Equity and Diversity.

The Conflict Resolution Council
If a reasonable effort fails to resolve any conflict, the Conflict-Resolution Council may be convened if requested in writing by either of the parties or the Ombudsperson. The full Council will meet annually to review and recommend any change in the SOP and procedures and make an annual report to the Executive Dean. The Executive Dean will select a twelve-member Conflict-Resolution Council to include two members from each of the following groups:

- Pre-clinical learners
- Clinical learners
- Pre-clinical faculty
- Clinical faculty
- Residents
- BSOM Administration

The Chair of the Council, appointed by the Executive Dean, will be one of the faculty members on the Council. All members are appointed to the Council for a three-year term. The appointment term will be staggered so that the council always has experienced members. The Ombudsperson is not a member of the Council but is present at Council meetings.
When a case arises for deliberation, the Chair of the Conflict-Resolution Council will select an ad hoc Sub-Council consisting of five members from the Conflict-Resolution Council. This Sub-Council will include representatives from the appropriate peer groups of the reporting individual and alleged offender. If one of the parties involved is not represented on the full Conflict-Resolution Council, additional members from the appropriate group (e.g., nurses, staff, etc.) may be recruited to the Sub-Council.

Sub-Council Procedures include the following:

- Collecting the facts pertinent to the conflict, mediating between the parties, and making recommendations for resolution. The Council will assess the evidence as objectively as possible, be fair in its deliberations, and protect the rights of the individuals.
- Selecting its own chair to preside over deliberations. When the Sub-Council hears a case, the Ombudsperson, reporting individual, and alleged offender are present. The Ombudsperson is responsible for notifying the parties regarding the meeting time and place. The meeting will begin with the Ombudsperson presenting the case. The parties involved in the conflict will both have an opportunity to speak and to bring witnesses to speak. Neither party can be represented by legal counsel.
- All meeting proceedings, except deliberations of the Sub-Council on findings and recommendations, shall be recorded by the Ombudsperson. The written record shall serve as the official documentation of the hearing and shall be maintained in a secure file in the BSOM Office of Student Affairs. All proceedings and deliberations shall remain confidential to the extent permitted by law.
- The Sub-Council will prepare a report for the Executive Dean and the full Conflict Resolution Council containing the facts of the case and any recommendations made through their deliberations. The Executive Dean will advise the conflicting parties as to the recommendations of the Sub-Council and of his/her concurrence with the recommendations. The Executive Dean’s decision constitutes the final disposition of the matter within the medical school. Other university policies may govern decisions affecting faculty and staff.

Protection Against Retaliation
Those who are accused of mistreatment will be informed by the Ombudsperson that retaliation is regarded as a form of mistreatment and violation of the SOP. The accusation of retaliation will be handled with the same procedure as mistreatment.

False Accusation
Any complainant, respondent, or witness found to have been intentionally dishonest in the processes described in this SOP (e.g., the complainant making the allegation) may be subject to disciplinary action.
Procedures for Implementation and Review

This procedure is to be reviewed by the M1-M4 Curriculum Committees before approval by the Executive Curriculum Committee every three years.

This procedure will be disseminated by the Office of Student Affairs to students and teaching faculty/administration.

Related Policies

ECU Faculty Manual (Parts VIII and XII): [https://www2.ecu.edu/facultysenate/currentfacultymanual/manual.pdf](https://www2.ecu.edu/facultysenate/currentfacultymanual/manual.pdf).

Part VIII: Personnel Policies and Procedures for Faculty
Part XII: Faculty Appellate Provisions

East Carolina University Student Code of Conduct: [https://policy.ecu.edu/11/30/01/](https://policy.ecu.edu/11/30/01/).

Applicable Laws, Regulations & Standards

LCME Standard 3, Element 6.
<table>
<thead>
<tr>
<th>Did the following occur?</th>
<th>Not mistreatment</th>
<th>Mistreatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>M Malicious intent</td>
<td>On the first day of 3rd year, the senior resident on service says, “You guys sure are green,” then offers to help the learners find a work-station.</td>
<td>A resident intentionally gives a learner misinformation about how to find a patient room. The resident is later heard bragging about “teaching the new guys how it is here.”</td>
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<tr>
<td>I Intimidation on purpose</td>
<td>A learner working in clinic with the Chair of the pediatrics department is nervous because the Chair can “make or break” his career.</td>
<td>A resident tells a learner that they intend to make them cry before the rotation is over.</td>
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<td>S Sexual Harassment</td>
<td>A male learner is asked not to go into a room because the patient only wants female providers to be present for a sensitive exam.</td>
<td>An attending tells a learner, “I can tell you know how to grab it like you mean it” while inserting a Foley catheter.</td>
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<td>T Threatening behavior, verbal or physical</td>
<td>A learner is yelled at to get out of the way by a nurse as a patient is about to be shocked during a code event.</td>
<td>An attending says “don’t you ever question me in front of a patient again” while pointing a syringe at them after a joint injection.</td>
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<td>R Racism or other discrimination</td>
<td>A learner is given specific, objective, actionable feedback about their history taking technique.</td>
<td>A learner is told, “you’re not in the hood anymore” while being scolded for using a colloquialism while obtaining a history from a patient.</td>
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<tr>
<td>E Excessive or unrealistic expectations</td>
<td>A learner is asked to review an article and give a summary on rounds.</td>
<td>A learner is told it is their job to perform rectal exams (necessary or not) on every patient on the service.</td>
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<td>A Abusive favors</td>
<td>A learner is asked to get coffee for themselves and the whole team before rounds. The resident did it yesterday and the team gives the learner money for the coffee.</td>
<td>A learner is told to pick up the attending’s dry cleaning.</td>
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<tr>
<td>T Trading for grades</td>
<td>A learner is told that giving a short presentation during morning report can enhance their grade.</td>
<td>A learner is told that, if they help the chief resident pack up their apartment to move, they’ll get honors.</td>
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Appendix A

Adapted by David Gilbert, MD from
MISTREAT S. Reddy, V. Arora V2.0 revised 2013